

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

| El Nopa B12 944 1341 | : _ | | | if of each violation is specified in the narrative portion of the | Telephone Number | Date of Ins | pection PERMIT # |
|--|--------------------|------------------|------------|---|---------------------------------------|----------------|---|
| Establishment Address (umber and street, city, state, zip code) 470 Jean Albury Plaza Jean Albury, 1 471579 Owner Elias Roman Owner's Address Person in Charge Lizzath Delan Responsible Person's Email Carrielled Food Manager Address Roman (1/9/24) Certified Food Manager Address Roman (1/9/24) Address Roman Ad | Establishment Name | | | | 1 | (mm/dd/yr |) |
| Owner | | | | | - | 7/10/2 | 2019 19-94 |
| Owner's Address Person in Charge | | | , | | | | |
| Received by (name and fille printed): Responsible All | Owner | m kilan | 7 | MEN MEN LEISMALL LILES | Purpose: | Follow-uj | Release Date |
| Owner's Address Person in Charge Lizzeth D. Lenn Responsible Person's E-mail Certified Food Manager Address Roma (1/1/24) - CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" - VIOLATIONS) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" TO BE Corrected By Responsible Person's E-mail C. Z. NC. 3. R. I. Menu Type (See back of page) 6. HACCP 7. Other (list) 1. 2. 3. 4.X.5. Menu Type (See back of page) 6. HACCP 7. Other (list) 1. 2. 3. 4.X.5. Menu Type (See back of page) Menu Type (See back o | | Z.man | | | | 1 1 | |
| Person in Charge Lizzett De Lein Responsible Person's E-mail Certified Food Manager Andres Roman (1/4/24) To Be Corrected By Received by (fame and title printed): Andres Roman (1/4/24) Andres Roman (1/4/24) Menu Type (See back of page) A X S = Manual Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Hart (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 Menu Type (See back of page) To Other (list) 1 2 3 4 X 5 To De Corrected By Correcte | Owner's Address | | | | | | |
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| Responsible Person's E-mail S. Temporary G. HACCP 7. Other (list) 1 2 3 4 X 5 Andres Roman (1/9/24) - Certified Food Manager Andres Roman (1/9/24) - Certificat Food Manager Andres Roman (1/9/24) - Certificat Food Manager - VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SLIMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "K" Section# C/NC R Narrative To Be Corrected By 188 C Musual grass hair pass hair year hair year hair or concerned by the constant of the constan | Person in Charge | | | | 7 · | _C 2 | $_{ m NC}$ 3 $_{ m R}$ 1 |
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